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CONFIRMATION NO. 4738

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10/597,670		401	3732	932017

APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/NL05/00070 02/01/2005

**** FOREIGN APPLICATIONS *******

NETHERLANDS 1025397 02/04/2004

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ****

11/30/2007

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Verified and Acknowledged	/MICHAEL ROBERT BALLINGER/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	NETHERLANDS	3	12
					1

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TITLE

Dental Treatment Apparatus

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